lowa Ethics and Campaign

Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

File with:

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

electronically.
Effective May 1, 2010, all statements and reports for State PACs and State

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2010 OCT 28 PH 3: 14

COMMITTEE	- COLL OI	. 480 (
COMMITTEE NAME (Must be same as on Statement of Organiz	etion)	
CITIZENS FOR ECONTOMIL GROWTH	40.4.1.1.	FORM
IMPORTANT: Indicate by # type of committee you are reporting for:	IN LYON COUNT	7 DR-2 DISCLOSURE
(4) County Control Committee (5)	tate PAC (3)State Porty	(Rev. 12/2009) REPORT
(4) County Central Committee (5) County Candidate (6) City Candidate (8) City Candidate (8) City PAC (10) School Boar 11) Local Ballot Issue	(7) School Board or Other Political	
	GO CANEL LORDCOM SINGUISION NAC	For Office Lise Only
CANDIDATE COMMITTEES ONLY: Candidate Name		Comm. #
Sandraid Helite	Political Party (if applicable)	Logged in
Office County		Computer
Office Sought	District (If Senate or House)	Audited
Sto Mande tra guillant to account		
Late reports are subject to possible civil and criminal penatties. Pursual candidate's committee, and the chairperson, for any other type of committee.	nt to lows Code sections 688,32A(7) and 68A.401(3), the candidate for a
A state possessing for only during type of conten	nittee, is the individual responsible	for filing timely and accurate reports.
angs Oper	210 110- 1100	<u>, _</u> !
SIGNATURE OF PERSON FILLING REPORT	110 4 17 429	13 10.28-10 DATE SIGNED
STORE OF PERSON FILLING REPORT	TELEPHONE	DATE SIGNED
LAMERING A TOLOGO OF THE PARTY		• · · · · · · · · · · · · · · · · · · ·
IAM FILINGA PRIDAY BEFORE GENERAL	REPORT FOR (1) ELECTION /	(2)NON-ELECTION YEAR
(report date)	Indicate by #	
CHECK IF AMENDMENT TO REPORT DATED	•	
	•	ocal Committees, enter Date of Election
Check if this is final (termination) report and attach Notice of Dis	solution Form DR-3.	11/2/10
(You must continue to file reports until a DR-3 is filed.)		County & Local Committees, enter County in which Election is held
	l"	LYON
STATEMENT OF CASH ON HAND		
CASH ON HAND at the beginning of the reporting period. (Total of	5 - 11 db	
of the last reporting period or must be zero if this is first re	port filed.)	130,262.25
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach S	chedulo FO	
(Schedule H applies to Candidates' Committee	- O-14	
		120 010 0
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TOTAL	130, 262.25
Schedule B: Expenditures total (Attach Schedule B) (**als	io see debts and loans below)	<u> 29,789.87</u>
Schedule F: Loan Repayments total (Attach Schedule F).		
CASH ON HAND at the end of this reporting period (if final report be	alance must be zero)	s 100.472.3B
**UNPAID BILLS (From Schedule D - Attach Schedule D)		
"IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E		10,805.37
**OUTSTANDING LOANS (From Schedule E. Attack Schedule	i)	\$
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) CONSULTANT BREAKDOWN (Schedule G Attached?)		
		YESNO
CANDIDATE COMMITTEES ONLY:		_
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Sc	hedule H)	s O -
STATE COMMITTEES: Submit a reconciled campaign account bar	ik statement in January of each v	/ear.
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FOR INSTRUCTIONS, SEE BACK OF FOR	-OK	INSTR	UCTIONS.	SEE BA	ACK ()F	FORM
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Reset Form	SCHEDULE	
COUNT	(Rev. 07/03)	MONETARY EXPENDITURES
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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS FORECONOMIC GROWTH IN LYON COUNTY

	> 1 - (- +	DNOMIC GROWTH IN L	you county	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBÉ TRANSACTION)	AMOUNT EXPENDED
10/22/10	10# CK#1245	LINK STRATEGIES, LLC 321 E. WALNUT # 321 DES MOINES, IA. 50309	FOR DIRECT MAIL AND	\$25,000. 5
10/27/10	ID# CK# 1246	CVUIGAN SOFT WATER 702 S. UNION ROCK RAPIPS, IA. 51246		\$59.00
10/27	ID# CK# 1247	NEW CENTURY PRESS 310 FIRST AVENUE ROCK RAPIDS DA. 51246	DISPLAY ADS IN ALL COUNTY NEWS PAPERS	\$ 2,542.80
10/28	ID# CK# 1248	New Century press 310 first avenue Rock Rapios, ta. 5/4/6	MAIUNG +4 to	\$2,188.07
	ID# CK#		·	
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL

\$ 29,789.8

TOTAL (If last page of this schedule)

\$ 29,789-87

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ON	

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(I).)

Page	 67	

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)	
CETIZENS POR SANJANA	COUNTY
NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period,	Reset Form

SCHEDULE D (Rev. 08/98)	INCURRED INDESTEDNESS
CHE	CK THIS BOX
IF AI	MENDING
FOR	M

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice

DATE		has bee	in received.
INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
11/1/10	NEW CENTURY PRESS 310 FIRST AVENUE ROCK RAPIOS, IA. 51246	NEWSPAPER PRPT ADS.	
10/25/10	MILWAVKEE, WT. 53201	TELEPHONE AND INTERNET SERVICE	*427.37
10/22/10	THE STRATEGY GROUP, INC. 1603 ORRINGTON AVENUE 41730 EVANSTON-ILL 60201	CAMPAGN MSKAGE DESIGN - ESTIMATED.	±4500.00
10/22/10	DOON, TA. 51235	NEWS PAPER PRINT ADS -ESTIMATE	±1,000.00
10/22/10	LARCHWOOD, TA. 51241	NEWSPAPER PRINT	\$1,860.00
10/22/10	LYON COUNTY NEWS 113 E. MICHIGAN GEORGE, IA. 51237	NEWS PAPER PRUT AOS - ESTMATE	* 1,000.00.
10/2:3/10	UTTLE ROLL FREELANCE 309 MAIN STREET UTTLE ROCK JA. 51243	News paper print Ads —Estimate	91,005.00
	TOTAL DEBTS OWED BY COMMITTEE AT T	SUB-TOTAL	10,805.37

(for Schedule D)

"If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:

GANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or produces sorvices for learns such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

<u> </u>		
RESET	SCHEDULE	
COMMITTED	G BREA	KDOWN
CHIZENS FOR ECONOMIC GROWTH IN LYON COUNTY	(Rev. 02/08) CF MO	NETARY DITURES SULTANT
	CHECK THIS B	OX IF
PART I - NAME AND ADDRESS OF CONSULTANT Name of Consultant	AMENDING FO	RM
LINK STRATEGIES, LLC.		7
321 E. WALNUT ST. #321		1
DES MOLLIES State Zip Code		1
CONTRACT DEDICE CONTRACT		
From 07/01/10	DRMANCE	_
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ESTIMATES OF PERFORMANCE		j
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GENERAL CONSULTANT OF CAMPAIGN MESSA	66	
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FOR INSTRUCT	ONS, SEE BACK OF FORM	
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IN L	YOU COUNTY	(Rev. 02/08) EXPENDITURES BY CONSULTANT
		CHECK THIS BOX IF
PART I - NAME AND ADDRESS OF CONSULTANT Name of Consultant		
Banks as		
Molling Address 1004 St. AVENUE City State 70 Code		
CHY AVENUE		
ROCK RAPIOS, IA. 51246		
From 08/01/10		
TO 11/30/10 : 10,000. 00 + EXPENSES		
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PART II. ITEMIZED BREAKDOWN OF UNREMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF DATE DATE DATE		
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(MM/DO/YR)		POSE EXPENDED
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SUB-TOTAL \$		
TOTAL (If last page of this schedule) \$		this schedule) \$

GRAND FALLS CASINO RESORT

To: <u>I owa Campaign</u> Ethics f
To: <u>I owa Campaign</u> Ethics t Dis closure Board.
From: <u>Citizens</u> FOR ECONOMIC GROWTH IN LYON COUNTY
Fax Number: 515-281-4073
Message: THANK YOU. If you have any questions please let us know.
Jayne Wells
Jayne Wells Campaign Manager 712 472 4293
712 472 4293